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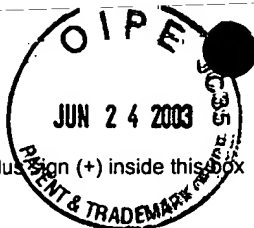
<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2002</h2> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision.</p>		<p>Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td>09/711,834</td></tr> <tr><td>Filing Date</td><td>November 13, 2000</td></tr> <tr><td>First Named Inventor</td><td>Henrik Jakobsen</td></tr> <tr><td>Examiner Name</td><td>G. Blackwell Rudasil</td></tr> <tr><td>Group Art Unit</td><td>1775</td></tr> <tr><td>Attorney Docket No.</td><td>352.007</td></tr> </table>		Application Number	09/711,834	Filing Date	November 13, 2000	First Named Inventor	Henrik Jakobsen	Examiner Name	G. Blackwell Rudasil	Group Art Unit	1775	Attorney Docket No.	352.007
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<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		<div style="transform: rotate(-45deg); font-weight: bold; font-size: 2em;">RECEIVED</div> <div style="transform: rotate(-45deg); font-weight: bold; font-size: 1.5em;">JUN 27 2003</div> <div style="transform: rotate(-45deg); font-weight: bold; font-size: 1.5em;">TC 1700</div>													
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METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																				
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account Deposit Account Number: 50-1170 Deposit Account Name: Boyle, Fredrickson, Newholm, Stein & Gratz S.C. The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	<h3>3. ADDITIONAL FEES</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th></th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>410</td><td>216</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>930</td><td>217</td><td>465</td><td>Extension for reply within third month</td><td>930.00</td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Andrew S. McConnell	Registration No. (Attorney/Agent)	32,272
Signature		Telephone	414-225-9755
		Date	6/19/03

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1775

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Applicati n Number	09/711,834	
	Filing Date	November 13, 2000	
	First Named Inventor	Henrik Jakobsen	
	Group Art Unit	1775	
	Examiner Name	G.A. Blackwell Rudasil	
Total Number of Pages in This Submission	14	Attorney Docket Number	352.007

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ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Formal Drawings	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Notification of Missing Requirements Under 35 USC 371	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
DECLARATION		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Andrew S. McConnell, Registration No. 32,272 Boyle, Fredrickson, Newholm, Stein & Gratz, S.C.
Signature	
Date	6/19/03

CERTIFICATE OF MAILING

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Signature		Date 6-19-03

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